ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	/	- tomo	
FEE DETERMINATION	- Di-	10401	1/1/10
O.I.P.E. CLASSIFIER	C.	177	2/1/
FORMALITY REVIEW	1 #	100105	6-0-0
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

~	Rejected	N	Non-elected
=	Allowed	- 1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

	÷	(1631110100	0		
Claim	Date	Claim	Date	Claim	Date
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3		53		103	
. 4		54	 	104	
5		55		105	
6		56		106	
7		57		107	
8		58		108	
9		59		109	
10		60		110	
11		61		111	
12		62		112	
13		63		113	
14		64		114	+++++++
15		65		115	+-{-}-
16		66	 	116	- - - - - - -
17		68		118	+-+++++
	 - - - - - 	69			
19		70		119	
20	4-4-1-1-1			120	-
4		71		121	- - - - - - - - - -
2 / /		72 73		122	
24		74		124	
25	 	75		125	
26	 	76		126	
27		77		127	
28	+ + + + + + + + + + + + + + + + + + + +	78		128	
29		79		129	
30		80		130	
31		81		131	
32		82		132	
33		83		133	
34		84		134	
35		85		135	
36		86		136	
37		87		137	
38		88		138	
39	++++	89		139	
40		90		140	
41		91		141	44444
42		92		142	
43		93		143	
44	 	94		144	
45	+++++	95		145	+ + + + + + + + + + + + + + + + + + + +
46	1-1-1-1-1	96		146	}
48	++++	97		147	
49	+	99			
50	 	100	 	145	+ + + + + + + + + + + + + + + + + + + +
1301		L 1'04 L L		1,24	

If more than 150 claims or 10 actions staple additional sheet here